PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10153333

01 4110 40 711 72 74 77												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			64					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	 	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			⟨ \ minus 20=		* 4 1			X\$ 9=		1	X\$18=	70 0
INDEPENDENT CLAIMS					*				<u> </u>	OR		<u>19 2</u>
MULTIPLE DEPENDENT CLAIM PI				inus 3 =	٤			X43=		OR	X86=	172
IVIC		NDENT CLAIMP		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	,	TOTAL		OR	TOTAL	1734
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUME PREVIC	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	-	AMENDMENT		PAID I	FOR		ŀ		FEE			FEE
	Total	*	Minus	**		=	ļ	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	*** DENIDENT	CLAIM	=		X43=		OR	X86=	
L	rino i Prizot			+145=		OR	+290=					
								TOTAL		OR	TOTAL	
		,	ADDIT. FEE	L	10.1	ADDIT. FEE						
		(Column 1)	(Column 3)									
8	V	REMAINING		HIGHI NUME	BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT		AFTER AMENDMENT		PREVIC PAID F		EXTRA		HAIL	FEE		HAIE	FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
:		(Column 1)							•			
AMENDMENT C	\	CLAIMS		HIGHE		·	· Γ	RATE	ADDI-	Î		ADDI-
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	ı		TIONAL	Ì	RATE	TIONAL
	Total		Minus	-	Un		H		FEE			FEE
	Independent	*	Minus	***		= .	L	X\$ 9=		OR	X\$18=	
	FIRST PRESENTATION OF MULTIPLE DEPENDE			CL AIM	<u> </u>		X43=		OR	X86=		
	THOTTHEOL	TO TO THE	JETH LE DEI		0.0			+145=	,	OR	+290=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								,	OR ,	TOTAL	
***	f the "Highest Nu	mber Previously Pa ober Previously Pai	aid For" IN THE	S SPACE is	less tha	n 3, enter "3."		DDIT. FEE	ropriate box	• •	ADDIT. FEE umn 1.	
	5	•	•		•	-			•			